

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032823

FILED
Aug 29, 2005
Secretary of State

Entity Name: CASTLE REALTY MANAGEMENT GROUP, LLC

Current Principal Place of Business:

15322 HARBOR DRIVE
MADEIRA BEACH, FL 33708

New Principal Place of Business:

10840 MOHAWK RD
ST PETERSBURG, FL 33708

Current Mailing Address:

15322 HARBOR DRIVE
MADEIRA BEACH, FL 33708

New Mailing Address:

P O BOX 8131
MADEIRA BEACH, FL 33738

FEI Number: 20-1063317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CALHOUN, MICHAEL D JR.
15322 HARBOR DRIVE
MADEIRA BEACH, FL 33708 US

Name and Address of New Registered Agent:

CALHOUN, MICHAEL D JR.
10840 MOHAWK RD
ST PETERSBURG, FL 33708 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL D CALHOUN JR.

08/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CALHOUN, MICHAEL D JR.
Address: 15322 HARBOR DRIVE
City-St-Zip: MADEIRA BEACH, FL 33708

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CALHOUN, MICHAEL D JR.
Address: 10840 MOHAWK
City-St-Zip: ST PETERSBURG, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL D CALHOUN JR.

MGRM

08/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date